B6 Summary (Official Form 6 - Summary) (12/14)

## United States Bankruptcy Court Southern District of Mississippi

In re	Bobby Joe Green,		Case No.	
-	Susan R Green	Debtors ,	Chapter	13
		Debtors	Chapter	10

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	42,278.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		39,212.26	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		60,000.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		121,091.76	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,506.47
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,178.00
Total Number of Sheets of ALL Schedules		20			
	To	otal Assets	42,278.00		
			Total Liabilities	220,304.02	

B 6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court** Southern District of Mississippi

In re	Bobby Joe Green,		Case No.	
	Susan R Green			
		Debtors	Chapter	13

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	60,000.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	60,000.00

### State the following:

Average Income (from Schedule I, Line 12)	2,506.47
Average Expenses (from Schedule J, Line 22)	2,178.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	3,789.94

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		25,127.26
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	60,000.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		121,091.76
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		146,219.02

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In re Bobby Joe Green,
Susan R Green

Debtors

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property Husband, Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

B6A (Official Form 6A) (12/07)

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

**0** continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re	Bobby Joe Green,	Case No.
	Susan R Green	

Debtors

## **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	cash on hand	J	100.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	checking acct w/Hancock Bank	J	443.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	furniture, furnishings, appliances	J	2,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	books, pictures, collections	J	200.00
6.	Wearing apparel.	their wearing apparel	J	200.00
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	rifle	J	250.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x		
10.	Annuities. Itemize and name each issuer.	X		

Sub-Total > 3,193.00 (Total of this page)

<sup>3</sup> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Bobby Joe Green
	Susan R Green

Case No.		

### Debtors

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	E	Community	without Deducting any Secured Claim or Exemption
terests in an education IRA as fined in 26 U.S.C. § 530(b)(1) or der a qualified State tuition plan defined in 26 U.S.C. § 529(b)(1). ve particulars. (File separately the cord(s) of any such interest(s). U.S.C. § 521(c).)	х		
terests in IRA, ERISA, Keogh, or her pension or profit sharing ans. Give particulars.	401-k plan	н	10,000.00
ock and interests in incorporated d unincorporated businesses.	x		
terests in partnerships or joint ntures. Itemize.	x		
overnment and corporate bonds d other negotiable and nnegotiable instruments.	x		
ecounts receivable.	x		
imony, maintenance, support, and operty settlements to which the btor is or may be entitled. Give rticulars.	X		
her liquidated debts owed to debtor	earned income tax credit	J	5,000.00
nuting tax retuilds. Give particulars.	federal income tax refund	J	5,000.00
	state income tax refund	J	5,000.00
quitable or future interests, life tates, and rights or powers ercisable for the benefit of the btor other than those listed in hedule A - Real Property.	x		
ontingent and noncontingent derests in estate of a decedent, ath benefit plan, life insurance licy, or trust.	х		
tha oca ter oca chicker the	defined in 26 U.S.C. § 529(b)(1). we particulars. (File separately the word(s) of any such interest(s). U.S.C. § 521(c).)  erests in IRA, ERISA, Keogh, or the pension or profit sharing than an incorporated dunincorporated businesses.  mize.  erests in partnerships or joint intures. Itemize.  evernment and corporate bonds dother negotiable and innegotiable instruments.  counts receivable.  dimony, maintenance, support, and operty settlements to which the botor is or may be entitled. Give riculars.  ther liquidated debts owed to debtor cluding tax refunds. Give particulars.  uitable or future interests, life ates, and rights or powers ercisable for the benefit of the botor other than those listed in hedule A - Real Property.  untingent and noncontingent erests in estate of a decedent, ath benefit plan, life insurance	defined in 26 U.S.C. § 529(b)(1). we particulars. (File separately the cord(s) of any such interest(s). U.S.C. § 521(c).)  erests in IRA, ERISA, Keogh, or the pension or profit sharing ins. Give particulars.  bock and interests in incorporated dunincorporated businesses. mize.  erests in partnerships or joint intures. Itemize.  erests in partnerships or joint intures. Itemize.  evernment and corporate bonds dother negotiable and innegotiable instruments.  counts receivable.  x  x  x  x  x  x  x  x  x  x  x  x  x	defined in 26 U.S.C. § 529(b)(1). we particulars. (File separately the ord(s) of any such interest(s). U.S.C. § 521(c).)  Herests in IRA, ERISA, Keogh, or tere pension or profit sharing ins. Give particulars.  Lock and interests in incorporated dunincorporated businesses. mize.  Lock and interests in incorporated businesses. mize.  Lock and interests in partnerships or joint natures. Itemize.  Lock and interests in incorporated businesses. mize.  Lock and interests in incorporate businesses.  Lock and interests in incorporate busin

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

25,000.00

Sub-Total >

(Total of this page)

B6B (Official Form 6B) (12/07) - Cont.

In re	Bobby Joe Green,
	Susan R Green

Case No.		

### Debtors

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O Description and Location E	Husband, Wife, Joint, or Communit	Debtor's Interest in Property without Deducting any
cl ta de	ther contingent and unliquidated laims of every nature, including ex refunds, counterclaims of the ebtor, and rights to setoff claims. every estimated value of each.	X		
in	atents, copyrights, and other tellectual property. Give articulars.	Х		
ge	icenses, franchises, and other eneral intangibles. Give articulars.	X		
co in § by ol th	ustomer lists or other compilations ontaining personally identifiable aformation (as defined in 11 U.S.C. 101(41A)) provided to the debtor y individuals in connection with braining a product or service from the debtor primarily for personal, amily, or household purposes.	X		
	utomobiles, trucks, trailers, and ther vehicles and accessories.	2007 Ford Mustang 2007 Yamaha motorcycle	J J	6,885.00 6,000.00
		2004 Ford F-350no motor	J	1,000.00
26. B	oats, motors, and accessories.	X		
27. A	ircraft and accessories.	х		
28. O	office equipment, furnishings, and applies.	x		
	fachinery, fixtures, equipment, and applies used in business.	х		
30. In	nventory.	X		
31. A	nimals.	X		
	rops - growing or harvested. Give articulars.	X		
	arming equipment and nplements.	x		
34. Fa	arm supplies, chemicals, and feed.	X		
			Sub-To (Total of this page	

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

## 15-51529-KMS Dkt 3 Filed 09/24/15 Entered 09/24/15 10:33:07 Page 7 of 47

B6B (Official Form 6B) (12/07) - Cont.

In	re Bobby Joe Green,		Ca	se No	
	Susan R Green				
			Debtors		
		SCHEDULE	E B - PERSONAL PROPERT (Continuation Sheet)	Y	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
35.	Other personal property of any kind not already listed. Itemize.	swimning p	ool	J	200.00

| Sub-Total > 200.00 (Total of this page) | Total > 42,278.00

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re Bobby Joe Green, Susan R Green

Debtors

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter
□ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
11 U.S.C. 8522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on Hand cash on hand	Miss. Code Ann. § 85-3-1(a)	100.00	100.00
Household Goods and Furnishings furniture, furnishings, appliances	Miss. Code Ann. § 85-3-1(a)	2,000.00	2,000.00
Books, Pictures and Other Art Objects; Collections	i <u>bles</u> Miss. Code Ann. § 85-3-1(a)	200.00	200.00
Wearing Apparel their wearing apparel	Miss. Code Ann. § 85-3-1(a)	200.00	200.00
<u>Firearms and Sports, Photographic and Other I</u> rifle	Hobby Equipment Miss. Code Ann. § 85-3-1(a)	250.00	250.00
Interests in IRA, ERISA, Keogh, or Other Pensio	on or <u>Profit Sharing Plans</u> Miss. Code Ann. § 85-3-1(e)	10,000.00	10,000.00
Other Liquidated Debts Owing Debtor Including earned income tax credit	<u>3 Tax Refund</u> Miss. Code Ann. § 85-3-1(i)	5,000.00	5,000.00
federal income tax refund	Miss. Code Ann. § 85-3-1(j)	5,000.00	5,000.00
state income tax refund	Miss. Code Ann. § 85-3-1(k)	5.000.00	5.000.00

Total: 27,750.00 27,750.00

B6D (Official Form 6D) (12/07)

In re	Bobby Joe Green,		Case No.
	Susan R Green		
_		Debtors	

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C C D E B T C R	A M	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	L-QD-C	ISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			swimning pool	T	A T E D			
BLUE WORLD POOLS INC 2533 N Carson Street Ste 4925 Carson City, NV 89706		J						
	_	_	Value \$ 200.00			Ш	16,280.00	16,080.00
Account No.	4		2007 Ford Mustang					
COUNTRY AUTO SALES 2268-A SIMPSON HWY 49 Mendenhall, MS 39114		J						
			Value \$ 6,885.00				8,000.00	1,115.00
Account No.  COUNTRY AUTO SALES 2268-A SIMPSON HWY 49 Mendenhall, MS 39114		J	2004 Ford F-350no motor  Value \$ 1,000.00				7,000.00	6,000.00
Account No. 8033			2007 Yamaha motorcycle					
Freedom Road Financial 10509 Professional Cir Suite 202 Reno, NV 89521		J						
			Value \$ 6,000.00				6,000.00	0.00
continuation sheets attached			(Total of	Sub this			37,280.00	23,195.00

 $B6D\ (Official\ Form\ 6D)\ (12/07)$  - Cont.

In re	Bobby Joe Green,		Case No.	
	Susan R Green		_	
•		Debtors	,	

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

	_	т —		٦,	7.	- 1		
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	J C H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	Ь	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 4361			2007 Yamaha motorcycle	Ϊ	A T E D			
YARD CARD PO 731 Mahwah, NJ 07430		J			D			
			Value \$ <b>6,000.00</b>				1,932.26	1,932.26
Account No.			Value \$					
Account No.	_	┢	v aruc ψ	┢		Н		
Account No.			Value \$					
			Value \$					
Account No.			Value \$					
Sheet 1 of 1 continuation sheets attack Schedule of Creditors Holding Secured Claims		d to	S (Total of t	ubt his j			1,932.26	1,932.26
			(Report on Summary of Sc		`ota lule		39,212.26	25,127.26

B6E (Official Form 6E) (4/13) Bobby Joe Green, Case No. \_\_\_ In re Susan R Green **Debtors** SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.) Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled

"Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

#### ■ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

#### ☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

#### ☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### ☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

#### ☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### ☐ Deposits by individuals

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### ☐ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### ☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

#### ☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re	Bobby Joe Green, Susan R Green		Case No.	
_		Debtors	_,	

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

#### **Domestic Support Obligations**

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED DISPUTED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CONTINGENT CREDITOR'S NAME, AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) past due child support for: H. Green, D. Account No. Green, J. Green, S. Green--ALL **ARREARS Misty Green** 0.00 576 Poplar Springs Roa Mendenhall, MS 39114 J 60,000.00 60,000.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 60,000.00 60,000.00 0.00

(Report on Summary of Schedules)

60,000.00

60,000.00

B6F (Official Form 6F) (12/07)

In re	Bobby Joe Green,		Case No.	
	Susan R Green			
_		Debtors	,	

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H H		CONTINGEN	DZLLQULDAT	DISPUTED	AMOUNT OF CLAIM
Account No. 8150			medical care	Ť	Ť		
AFTER HOURS CLINIC 376-A SIMPSON HWY 149 STE 400 Magee, MS 39111		J			E D		268.95
Account No.			OPEN ACCOUNT DEBT			T	
AT&T PO BOX 105503 Atlanta, GA 30348		J					1,400.00
Account No.			collecting for Hattiesburg Clinic-notification		H	H	
CREDIT BUREAU CENTRAL PO BOX 1529 Hattiesburg, MS 39403		J					0.00
A			MEDICAL CARE	-	$\vdash$	L	0.00
Account No. 0111  FORREST GENERAL HOSPIT PO BOX 16389 Hattiesburg, MS 39402		J	MEDICAL CARE				1,268.79
_3 continuation sheets attached				Subi			2,937.74
continuation sheets attached			(Total of t	his	pag	e)	2,337.74

B6F (Official Form 6F) (12/07) - Cont.

In re	Bobby Joe Green,	Case No.	
	Susan R Green		

## Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	6	U N	D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTIN	ZL-QU-	SPUT	AMOUNT OF CLAIM
(See instructions above.)	o R	c	IS SUBJECT TO SETOFF, SO STATE.	NGEN	Ď	Ė	AMOUNT OF CLAIM
Account No. 0106			MEDICAL CARE	Ť	DATED		
HATTIESDUDG CLINIC					Ь		
HATTIESBURG CLINIC 415 S 28TH AVE		J					
Hattiesburg, MS 39401							
							913.00
Account No.			NOTIFICATION	-			313.00
Account No.			NOTIFICATION				
HATTIESBURG CLINIC		١.					
PO BOX 2469		J					
Jackson, MS 39225							
							0.00
Account No. 8560			BUTANE ON OPEN ACCOUNT				
HERRING GAS CO INC							
PO BOX 1615		J					
Prentiss, MS 39474							
							843.87
Account No. 6718			MEDICAL CARE				
JEFF DAVIS COMMUN HOSP							
PO BOX 30528		J					
Tampa, FL 33630							
							884.00
Account No. 2634			MEDICAL CARE				
MACEE CENEDAL HOSPITAL							
MAGEE GENERAL HOSPITAL 300 SE THIRD AVE		J					
Magee, MS 39111							
							392.15
Sheet no. <u>1</u> of <u>3</u> sheets attached to Schedule of				Sub			3,033.02
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	3,033.02

B6F (Official Form 6F) (12/07) - Cont.

In re	Bobby Joe Green,	Case No.
	Susan R Green	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	l c	Ни	sband, Wife, Joint, or Community	I c	U	D	<u> </u>
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.			S P	AMOUNT OF CLAIM
Account No. 3919			MEDICAL CARE	]⊤	TE		
OVATION WOMEN'S WELLNE PO BOX 24023 DEPT. #03-066 Jackson, MS 39225		J			D		978.00
Account No.	t		COLLECTING FOR SOUTH MS ER	T			
PLANTATION BILLING CEN PO BOX 459077 SUNRISE, FL 33345	_	J	PHYSICIANS-NOTIFICATION				0.00
Account No.	-		MEDICAL CARE	-			0.00
SOUTH MS ER PHYSICIANS PO BOX 16987 Hattiesburg, MS 39404		J	MEDICAL CARE				1,123.00
Account No.	╁		collecting for Verizonnotification				,
SOUTHWEST CREDIT 4120 INTERNATIONAL PKW STE 1100 Carrollton, TX 75007		J					0.00
Account No. 3191			DEFICIENCY BALANCE ON FORECLOSED			$\vdash$	
STATEBRIDGE COMPANY LL 4600 S SYRACUSE STREET STE 700 Denver, CO 80237	x	J	HOME LOCATED IN MENDENHALL, SIMPSON CO. MS				110,050.00
Sheet no. 2 of 3 sheets attached to Schedule of		_	<u> </u>	Subt	tota	ıl	440.454.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	112,151.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Bobby Joe Green,	Case No.
	Susan R Green	

## Debtors

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME. MAILING ADDRESS INCLUDING ZIP CODE. AND ACCOUNT NUMBER (See instructions above.)  Account No.  United Auto Sales PO Box 441 Mendenhall, MS 39114   Total  Account No.  VERIZON WIRELESS CUSTOMER SERVICE DEPT 777 BIG TIMBER RD Elgin, IL 69123  Account No.  VERIZON WIRELESS CUSTOMER SERVICE DEPT 778 BG TIMBER RD Elgin, CORRESPONDENCE PO BOX 45029 Wallingford, CT 06492  Account No.  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total  (Report on Summary of Schedules)  12,0970.00								
Account No.  United Auto Sales PO Box 441 Mendenhall, MS 39114  Account No.  VERIZON WIRELESS CUSTOMER SERVICE DEPT 777 BIG TIMBER RD Elgin, IL 60123  Account No.  VERIZON WIRELESS Wallingford, CT 06492  Sheet no. 3_ of 3_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total  Deficiency Balance On 2001 FORD F150 PICKUP  Deficiency Balance On 2001 FORD F150 Deficiency Balance On 2001 F1	CREDITOR'S NAME.	C	Hu	sband, Wife, Joint, or Community	S	U	D	
United Auto Sales PO Box 441 Mendenhall, MS 39114  X J  PICKUP  PICKUP  PICKUP  PICKUP  PICKUP  PICKUP  I J  I J  I J  I J  I J J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J  I J J J  I J	MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	DE B T O R	W J	CONSIDERATION FOR CLAIM. IF CLAIM	N T I	LLQULDA	SPUTED	AMOUNT OF CLAIM
United Auto Sales PO Box 441 Mendenhall, MS 39114  Account No.  VERIZON WIRELESS CUSTOMER SERVICE DEPT 777 BIG TIMBER RD Elgin, IL 60123  Account No.  VERIZON WIRELESS ATTN: CORRESPONDENCE PO BOX 5029 Wallingford, CT 06492  Sheet no. 3_ of 3_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Sheet no. 3_ of 3_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total	Account No.				٦	T E		
VERIZON WIRELESS CUSTOMER SERVICE DEPT 777 BIG TIMBER RD Eigin, IL 60123  Account No.  VERIZON WIRELESS ATTN: CORRESPONDENCE PO BOX 5029 Wallingford, CT 06492  Account No.  Account No.  Sheet no. 3_ of 3_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total  J   J   J   J   J   J   J   J   J   J	PO Box 441	x	J	PICKUP		D		1,370.00
CUSTOMER SERVICE DEPT 777 BIG TIMBER RD Elgin, IL 60123  Account No.  VERIZON WIRELESS ATTN: CORRESPONDENCE PO BOX 5029 Wallingford, CT 06492  Account No.  Account No.  Account No.  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total  J D notification  Notific	Account No.	T		open account debt	T			
Account No.  VERIZON WIRELESS ATTN: CORRESPONDENCE PO BOX 5029 Wallingford, CT 06492  Account No.  Account No.  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total  Ontification  I V V V V V V V V V V V V V V V V V V	CUSTOMER SERVICE DEPT 777 BIG TIMBER RD		J					
VERIZON WIRELESS ATTN: CORRESPONDENCE PO BOX 5029 Wallingford, CT 06492  Account No.  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Account No.  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total								1,600.00
ATTN: CORRESPONDENCE PO BOX 5029 Wallingford, CT 06492  Account No.  Account No.  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total  J J J J J J J J J J J J J J J J J J	Account No.			notification				
Account No.  Account No.  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total  O.00  O.0	ATTN: CORRESPONDENCE PO BOX 5029		J					
Account No.  Account No.  Account No.  Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total	wallingford, C1 06492							0.00
Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Sheet no. Total  Total	Account No.							
Creditors Holding Unsecured Nonpriority Claims  (Total of this page)  Total	Account No.							
Creditors Holding Unsecured Nonpriority Claims  (Total of this page)  Total								
Total				,	Sub	tota	ıl	2 070 00
404 004 70	Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	2,970.00
				(Report on Summary of So				121,091.76

In re Bobby Joe Green,
Susan R Green

Case No. \_\_\_\_\_\_

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Debtors

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

B6G (Official Form 6G) (12/07)

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. B6H (Official Form 6H) (12/07)

Bobby Joe Green, Susan R Green

Case No.		

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

HUNTER GREEN 839 ATHENS ROAD Mendenhall, MS 39114

RACHELLE J GREEN PO BOX 2134 Madison, MS 39130 United Auto Sales PO Box 441 Mendenhall, MS 39114

STATEBRIDGE COMPANY LL 4600 S SYRACUSE STREET STE 700 Denver, CO 80237

Fill in this informa	ation to identify your case:	
Debtor 1	Bobby Joe Green	_
Debtor 2 (Spouse, if filing)	Susan R Green	_
United States Bar	nkruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI	_
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing post-petition chapter 13 income as of the following date:
Official Fo	orm B 6I	MM / DD/ YYYY
<b>Schedule</b>	: I: Your Income	12/13
Be as complete a supplying correc	and accurate as possible. If two married people are filing together (Deb t information. If you are married and not filing jointly, and your spouse	tor 1 and Debtor 2), both are equally responsible for is living with you, include information about your

spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment 1. Debtor 2 or non-filing spouse Debtor 1 information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation housewife Include part-time, seasonal, or Employer's name **Energy Drilling Co** self-employed work. **Employer's address** Occupation may include student **PO Box 905** or homemaker, if it applies. Natchez, MS 39121 How long employed there? 5 yrs

Part 2: **Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay. 3.

Calculate gross Income. Add line 2 + line 3.

			non-fi	ling spouse
2.	\$	3,878.28	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	3,878.28	\$	0.00

For Debtor 2 or

For Debtor 1

Debtor Debtor			Case	number ( <i>if known</i> )			
			For	Debtor 1		btor 2 or	
(	Copy line 4 here	4.	\$	3,878.28	\$	0.00	
5. <b>I</b>	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	605.04	\$	0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e. Insurance	5e.	\$	336.73	\$	0.00	
	5f. Domestic support obligations	5f.	\$	515.04	\$	0.00	
	5g. Union dues	5g.	\$_	0.00		0.00	
;	5h. Other deductions. Specify:	5h.+	\$	0.00	+ ֆ	0.00	
	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,456.81	\$	0.00	
7. (	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,421.47	\$	0.00	
8	<ul> <li>List all other income regularly received:</li> <li>8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. </li> <li>8b. Interest and dividends</li> <li>8c. Family support payments that you, a non-filing spouse, or a depen</li> </ul>	8a. 8b. a <b>dent</b>	\$ \$	0.00 0.00	\$\$ \$	0.00 0.00	
	regularly receive						
	Include alimony, spousal support, child support, maintenance, divorce	0.0	¢.	0.00	¢.	0.00	
	settlement, and property settlement.	8c.	\$ \$	0.00	\$ \$	0.00	
	8d. Unemployment compensation 8e. Social Security	8d. 8e.	\$	0.00	\$	0.00	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assis that you receive, such as food stamps (benefits under the Supplementa Nutrition Assistance Program) or housing subsidies.  Specify:	tance	\$ <u></u>	0.00	\$ \$	0.00	
8	8g. Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h. Other monthly income. Specify: tax refund	8h.+	\$	85.00	+ \$	0.00	
							1
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	85.00	\$	0.00	
	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,506.47 + \$_	0	.00 = \$	2,506.47
   	State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are Specify:	your deper			ed in <i>Sch</i>	nedule J. 11. +\$	0.00
١	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of applies				a, if it	12. \$	2,506.47
13. <b>I</b>	Do you expect an increase or decrease within the year after you file this	form?				Combine monthly	
i	■ No.						
[	Yes. Explain:						

Fill	in this informa	ation to identify yo	our case:								
Deb	tor 1	Bobby Joe G	ireen			Che	eck if this is:				
		Bossy coc c	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				An amended filing				
Deb	Debtor 2 Susan R Green					☐ A supplement showing post-petition chapte					
(Spc	ouse, if filing)						13 expenses as of	the following date:			
Unit	ed States Bankr	ruptcy Court for the:	SOUTH	IERN DISTRICT OF MISS	ISSIPPI		MM / DD / YYYY				
Cas	e number						A separate filing fo	r Debtor 2 because Debtor			
(If kr	nown)					2 maintains a separate household					
Of	fficial Fo	rm B 6J									
		J: Your	_ Exper	ises				12/13			
Be info	as complete ormation. If m	and accurate as	s possible. eded, atta	. If two married people and the control of the cont							
Par		ribe Your House	hold								
1.	Is this a joir										
	☐ No. Go to										
	■ Yes. <b>Doe</b>	es Debtor 2 live	in a separ	ate household?							
	■ N	lo									
	ΠY	es. Debtor 2 mus	st file a sep	parate Schedule J.							
2.	Do you have	e dependents?	■ No								
	Do not list D and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?			
	Do not state							□ No			
	dependents'	names.						☐ Yes			
								□ No			
								Yes			
								□ No			
								☐ Yes			
								□ No			
3.	Do your exr	enses include	_		-		_	☐ Yes			
<u> </u>	expenses o yourself and	f people other t d your depende	han nts? □	No Yes							
Par		ate Your Ongoi									
exp				uptcy filing date unless y y is filed. If this is a supp				of the form and fill in the			
Incl	luda avnansa	e naid for with	non-caeh	government assistance i	f you know						
the		h assistance an		cluded it on <i>Schedule I:</i> \			Your expe	enses			
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgage	4.	\$	0.00			
	If not include	ded in line 4:									
	4a. Real e	estate taxes				4a.	\$	0.00			
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.	\$	0.00			
				upkeep expenses		4c.	\$	0.00			
		owner's associate				4d.	\$	0.00			
5.	Additional r	nortgage payme	ents for vo	our residence, such as ho	me equity loans	5.	\$	0.00			

es: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:	Case numb 6a. 6b. 6c.	\$	300.00 80.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services	6b.	\$	
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services	6b.	\$	
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services	6b.	\$	
Telephone, cell phone, Internet, satellite, and cable services		· -	
	00.	.*	278.00
	6d.	\$	0.00
and housekeeping supplies	— 7.	\$	575.00
		·	0.00
	_	· -	150.00
	_	*	
	_	· -	60.00
	11.	Ф	65.00
	12.	\$	400.00
		·	0.00
		· -	0.00
•	14.	Ψ	0.00
, , ,	15a.	\$	0.00
			0.00
		·	180.00
		*	0.00
· · · · · · · · · · · · · · · · · · ·		<u> </u>	0.00
	16.	\$	15.00
			10.00
	17a.	\$	0.00
• •		· -	0.00
		·	0.00
		*	0.00
		Ψ	0.00
	18.	\$	0.00
		· ·	0.00
	19.	*	0.00
·		our Income.	
			0.00
Real estate taxes	20b.	\$	0.00
Property, homeowner's, or renter's insurance	20c.	\$	0.00
· ·			0.00
, i , i i i		*	0.00
		· -	75.00
inisc. out of pocket expenses		- Ψ	73.00
monthly expenses. Add lines 4 through 21.	22.	\$	2,178.00
esult is your monthly expenses.		-	
Copy line 12 (your combined monthly income) from Schedule I.			2,506.47
Copy your monthly expenses from line 22 above.	23b.	-\$	2,178.00
	į		•
Subtract your monthly expenses from your monthly income.	23c.	¢	328.47
The result is your <i>monthly net income</i> .		\$	3∠0.4/
ii o c s ot t it and	real property expenses not included in lines 4 or 5 of this form or on Sc Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Specify: misc. out of pocket expenses monthly expenses. Add lines 4 through 21. esult is your monthly expenses. late your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22 above.	ng, laundry, and dry cleaning nal care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books tainment, clubs, recreation, newspapers, magazines, and books taince. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Health insurance Health insurance Health insurance, Specify. Do not include taxes deducted from your pay or included in lines 4 or 20.  FERSONAL PROPERTY Intent or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other spec	ng, laundry, and dry cleaning nal care products and services all and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. t include car payments. t include car payments. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes deducted from your pay or included in lines 4 or 20. Life insurance Include taxes and limes 4 or 20. Life insurance Life ins

B6 Declaration (Official Form 6 - Declaration). (12/07)

**Bobby Joe Green** 

## **United States Bankruptcy Court Southern District of Mississippi**

22

Date September 24, 2015 Signature /s/ Bobby Joe Green
Bobby Joe Green

Debtor

Date September 24, 2015 Signature /s/ Susan R Green

Susan R Green Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

## **United States Bankruptcy Court Southern District of Mississippi**

In re	Bobby Joe Green Susan R Green		Case No.	
		Debtor(s)	Chapter	13

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT <b>\$56,494.00</b>	SOURCE his 2014 wages
\$3,867.00	her 2014 wages
\$64,148.00	his 2013 wages
\$3,673.00	her 2013 wages
\$45,590.00	his 2012 wages
\$0.00	she had no 2012 wages

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#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** 

**SOURCE** 

#### 3. Payments to creditors

#### None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/
NAME AND ADDRESS OF CREDITOR TRANSFERS

AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

#### 5. Repossessions, foreclosures and returns

None 

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER Statebridge Company, LLC 4600 S. Syracuse Street

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN March 2015

DESCRIPTION AND VALUE OF **PROPERTY** 

house and property located in Mendenhall, Simpson Co., MS, \$1000,000.00

Ste 700

Denver, CO 80237

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT

DATE OF ORDER CASE TITLE & NUMBER

DESCRIPTION AND VALUE OF

**PROPERTY** 

#### 7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or** since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

NAME AND ADDRESS OF PAYEE

Edwin F Tullos PO Box 505 Raleigh, MS 39153 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$310.00 filing fee
\$100.00 attorney fee

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

5

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

6

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS EN

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

**ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

## 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

8

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	September 24, 2015	Signature	/s/ Bobby Joe Green
	_		Bobby Joe Green
			Debtor
Date	September 24, 2015	Signature	/s/ Susan R Green
	_		Susan R Green
			Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

## United States Bankruptcy Court Southern District of Mississippi

In re	Bobby Joe Green  Susan R Green		Case N	o.	
		Debtor(s)	Chapte	r <b>13</b>	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be p	aid to me, for service	
	For legal services, I have agreed to accept		\$	3,200.00	
	Prior to the filing of this statement I have received			100.00	
	Balance Due		\$	3,100.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are m	embers and associate	es of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name.				ny law firm. A
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspec	ts of the bankrupto	cy case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, statemed</li> <li>c. Representation of the debtor at the meeting of creditors</li> <li>d. Representation of the debtor in adversary proceedings are</li> <li>e. [Other provisions as needed]</li> <li>Negotiations with secured creditors to recreaffirmation agreements and applications</li> </ul>	nent of affairs and plan which and confirmation hearing, a and other contested bankrupt duce to market value; ex as needed; preparation	h may be required; nd any adjourned ccy matters; emption planni	hearings thereof;	nd filing of
_	522(f)(2)(A) for avoidance of liens on hous	_			
6.	By agreement with the debtor(s), the above-disclosed fee d Representation of the debtors in any discl any other adversary proceeding.			nces, relief from	stay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any a pankruptcy proceeding.	greement or arrangement for	payment to me for	or representation of the	he debtor(s) in
Date	d: <b>September 24, 2015</b>	/s/ Edwin F. Tulle	os		
		Edwin F. Tullos			
		The Tullos Law I P.O. Box 505	-11111		
		Raleigh, MS 391		_	
		601-782-9411 Fa edtullos@att.net		9	

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF MISSISSIPPI

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## **Chapter 12:** Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

B 201B (Form 201B) (12/09)

## **United States Bankruptcy Court** Southern District of Mississippi

In re	Bobby Joe Green Susan R Green		Case No.	
		Debtor(s)	Chapter	13

## CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

#### **Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Bobby Joe Green Susan R Green	X /s/ Bobby Joe Green	September 24, 2015
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X /s/ Susan R Green	September 24, 2015
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Fill in this information to identify your case:								
Debtor 1	Bobby Joe Green							
Debtor 2 (Spouse, if filin	Susan R Green							
United States Bankruptcy Court for the: Southern District of Mississippi								
Case number (if known)								

	Check	c as directed in lines 17 and 21:
		, ,
		1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	· ·	
11 U.S.C. § 1325(b)(3).  2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).  3. The commitment period is 3 years.		
		4. The commitment period is 5 years.

☐ Check if this is an amended filing

## Official Form 22C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- What is your marital and filing status? Check one only.
  - ☐ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

If you have nothing to report for any line, write \$0 in the s	pace.							
				Colui Debt		Columi Debtor non-fil		
<ol><li>Your gross wages, salary, tips, bonuses, overtime, all payroll deductions).</li></ol>	and co	ommissi	ons (before	\$	3,789.94	\$	0.00	
<ol> <li>Alimony and maintenance payments. Do not include Column B is filled in.</li> </ol>	e payme	ents from	a spouse if	\$	0.00	\$	0.00	
4. All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househol and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3.	<b>t.</b> Includ ld, your	de regula depende	r contributions ents, parents,	\$	0.00	\$	0.00	
5. Net income from operating a business, profession	, or farı	m						
Gross receipts (before all deductions)	\$	0.00						
Ordinary and necessary operating expenses	-\$	0.00						
Net monthly income from a business, profession, or fa	rm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00	
6. Net income from rental and other real property								
Gross receipts (before all deductions)	\$	0.00						
Ordinary and necessary operating expenses	-\$	0.00						
Net monthly income from rental or other real property	\$_	0.00	Copy here ->	\$	0.00	\$	0.00	

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2		Bobby Joe Green Susan R Green		Case number	(if known)			
				Column A Debtor 1		Column B Debtor 2 c		
7. <b>I</b> n	tere	est, dividends, and royalties		\$	0.00	\$	0.00	
		nployment compensation		\$	0.00	\$	0.00	
		ot enter the amount if you contend that the amount received was a benefit the Social Security Act. Instead, list it here:	efit					
			00					
			00					
		<b>ion or retirement income.</b> Do not include any amount received that wa fit under the Social Security Act.	as a	\$	0.00	\$	0.00	
De re de	o no ceiv ome:	me from all other sources not listed above. Specify the source and a ot include any benefits received under the Social Security Act or payme wed as a victim of a war crime, a crime against humanity, or international estic terrorism. If necessary, list other sources on a separate page and pronounces in the sources on a separate page and pronounces.	nts al or					
	10a	a		\$	0.00	\$	0.00	
	10k	b		\$	0.00	\$	0.00	
	100	c. Total amounts from separate pages, if any.	+	- \$	0.00	\$	0.00	
		ulate your total average monthly income. Add lines 2 through 10 for column. Then add the total for Column A to the total for Column B.	\$	3,789.94	+ \$ _	0.00	= \$	3,789.94
								otal average onthly income
Part 2:		Determine How to Measure Your Deductions from Income					1111	ontiny income
12. <b>C</b>	opy alcu	your total average monthly income from line 11ulate the marital adjustment. Check one:					\$	3,789.94
	) Y	You are not married. Fill in 0 on line 3d.						
	Y	You are married and your spouse is filing with you. Fill in 0 in line 13d.						
	F	You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NC dependents, such as payment of the spouse's tax liability or the spouse						
		In lines 13a-c, specify the basis for excluding this income and the amou adjustments on a separate page.	nt of in	come devoted	l to each	purpose. If ne	ecessary,	list additional
	It	If this adjustment does not apply, enter 0 on line 13d.						
		13a	\$					
		13b	\$					
		13c	+\$_					
	1	13d. Total	\$	0.0	<u>o</u> c <sub>o</sub>	ppy here=> 13	d	0.00
14. `	You	r current monthly income. Subtract line 13d from line 12.				14	. \$	3,789.94
15.	Calc	culate your current monthly income for the year. Follow these steps	:					0.700.0:
•	15a.	. Copy line 14 here=>				158	a. \$	3,789.94
		Multiply line 15a by 12 (the number of months in a year).					х	12
,	15b.	. The result is your current monthly income for the year for this part of	the forr	n.		151	o. \$	45,479.28

Debt Debt			oy Joe Green n R Green		Case number (if known)			_
16	. Calc	ulate t	the median family income that applies to y	ou. Follow these steps:				
	16a.	Fill in	the state in which you live.	MS				
	16b.	Fill in	the number of people in your household.	2				
			the median family income for your state and	size of household.		16c.	\$	44,832.00
			d a list of applicable median income amounts ctions for this form. This list may also be ava				_	
17	. How		e lines compare?	mable at the bankraptey	ording office.			
	17a.		Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N					t determined under
	17b.		Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> current monthly income from line 14 above	lation of Disposable Ir				
Par	t 3:	Cald	culate Your Commitment Period Under 11	U.S.C. §1325(b)(4)				
18.	Сор	y your	total average monthly income from line 1	1.		18.	\$	3,789.94
19.	<b>Ded</b>	uct the	e marital adjustment if it applies. If you are at calculating the commitment period under 1 acome, copy the amount from line 13d.	married, your spouse is	not filing with you, and you			_
			al adjustment does not apply, fill in 0 on line	19a.		19a. <b>-</b>	\$	0.00
	Sub	tract li	ne 19a from line 18.			19b.	\$	3,789.94
20.	Cald	ulate v	your current monthly income for the year.	Follow these steps:				
_0.		-	line 19b	•		20a.	\$_	3,789.94
			ly by 12 (the number of months in a year).				_	x 12
	20b.	The re	esult is your current monthly income for the y	ear for this part of the fo	rm	20b.	\$_	45,479.28
	20c.	Copy	the median family income for your state and	size of household from I	ine 16c		\$_	44,832.00
	21	How o	do the lines compare?					
	۷۱.	_	•	as ardered by the sourt	on the top of page 1 of this form	ah a ak	hov 2	The commitment
			ine 20b is less than line 20c. Unless otherwineriod is 3 years. Go to Part 4.	se ordered by the court,	on the top of page 1 of this form	, cneck	DOX 3,	rne communent
			Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	less otherwise ordered l	by the court, on the top of page 1	of this	form,	check box 4, The
Par	t 4:	Sigr	n Below					
	By s	igning	here, under penalty of perjury I declare that t	he information on this st	atement and in any attachments	is true	and co	rrect.
)	( /s/	Bobb	y Joe Green		Susan R Green			
			oe Green of Debtor 1		san R Green nature of Debtor 2			
			tember 24, 2015	· ·	e <b>September 24, 2015</b>			
		MM /	/ DD / YYYY		MM / DD / YYYY		=	
	-		ked 17a, do NOT fill out or file Form 22C-2.	1- f Ou !!	-1.6	la a ta		a Bara A A a I
	IT VO	II CDAC	ked 17b, fill out Form 22C-2 and file it with th	is form. On line 39 of th:	at form, convivour current month	IV INCOR	ne tron	n iine 14 ahove

Fill in this information to identify your case:	
Debtor 1 Bobby Joe Green	
Debtor 2 Susan R Green (Spouse, if filing)	
United States Bankruptcy Court for the: Southern District of Mississip	ppi
Case number (if known)	☐ Check if this is an amended filing
Official Form 22C-2 Chapter 13 Calculation of Your Dispos	sable Income 12/14
To fill out this form, you will need your completed copy of <i>Chapter Commitment Period</i> (Official Form 22C-1).	13 Statement of Your Current Monthly income and Calculation of
	e filing together, both are equally responsible for being accurate. If more line number to which additional information applies. On the top any
Part 1: Calculate Your Deductions from Your Income	
the questions in lines 6-15. To find the IRS standards, go online information may also be available at the bankruptcy clerk's office.  Deduct the expense amounts set out in lines 6-15 regardless of your	standards for certain expense amounts. Use these amounts to answer the e using the link specified in the separate instructions for this form. This ce.  r actual expense. In later parts of the form, you will use some of your actual operating expenses that you subtracted from income in lines 5 and 6 of Form
22C-1, and do not deduct any amounts that you subtracted from you	
If your expenses differ from month to month, enter the average expe	ense.
Note: Line numbers 1-4 are not used in this form. These numbers a	pply to information required by a similar form used in chapter 7 cases.
5. The number of people used in determining your deduction:	s from income
Fill in the number of people who could be claimed as exemption plus the number of any additional dependents whom you support the number of people in your household.	ns on your federal income tax return, ort. This number may be different from
National Standards You must use the IRS National Stand	lards to answer the questions in lines 6-7.
<ol> <li>Food, clothing, and other items: Using the number of people Standards, fill in the dollar amount for food, clothing, and other</li> </ol>	
the dollar amount for out-of-pocket health care. The number of	eople you entered in line 5 and the IRS National Standards, fill in people is split into two categoriespeople who are under 65 and er IRS allowance for health car costs. If your actual expenses are nount on line 22.

Official Form 22C-2

Susan R Green Debtor 2 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 120.00 Copy line 7c here=> \$ 120.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$ 144 0 7e. Number of people who are 65 or older 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy line 7f here=> \$ 7g. **Total.** Add line 7c and line 7f 120.00 Copy total here=> 7g. 120.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, 545.00 fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 564.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Average monthly Name of the creditor payment -NONE-Copy line Repeat this amount 0.00 0.00 9b. Total average monthly payment 9b here=> -\$ on line 33a. 9c. Net mortgage or rent expense. Copy Subtract line 9b (total average monthly payment) from line 9a (mortgage line 9c 564.00 564.00 or rent expense). If this number is less than \$0, enter \$0. 9c. \$ here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

**Bobby Joe Green** 

Debtor 1

Debtor 1 Debtor 2	Bobby Joe Green Susan R Green		Са	se number (	if known)		
11.	Local transportation expenses: Check the number of vehic	cles for whic	ch you claim an	ownersh	ip or operating	g expense.	
	☐ 0. Go to line 14.						
	☐ 1. Go to line 12.						
	2 or more. Go to line 12.						
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for						488.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.						
Ve	Describe Vehicle 1: 2007 Ford Mustang						
13a.	Ownership or leasing costs using IRS Local Standard		13a.	\$	517.00		
13b.	Average monthly payment for all debts secured by Vehicle 1						
	Do not include costs for leased vehicles.						
	To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then dived by 60.						
	Name of each creditor for Vehicle 1	Average r	monthly				
	COUNTRY AUTO SALES	\$	133.33				
			Copy 13b here =>	· -\$	133.33		
13c.	Net Vehicle 1 ownership or lease expense					Copy net Vehicle 1	
	Subtract line 13b from line 13a. if this amount is less than \$0	), enter \$0.	13c.	\$	383.67	expense here => \$	383.67
Ve	hicle 2 Describe Vehicle 2: 2007 Yamaha motorcyc	ele					
13d.	Ownership or leasing costs using IRS Local Standard		13d.	\$	517.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not incl	lude costs for				
	Name of each creditor for Vehicle 2	Average r	monthly				
	Freedom Road Financial	\$	100.00				
			Copy 13e here =>	• -\$		Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0	), enter \$0.	13f.	\$	417.00	Copy net Vehicle 2 expense here => \$	417.00
14.	<b>Public transportation expense:</b> If you claimed 0 vehicles in <i>Transportation</i> expense allowance regardless of whether you				ards, fill in the	Public \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in whost claim more than the IRS Local Standard for <i>Public Trans</i>	hat you beli					0.00

**Bobby Joe Green** 

Debtor 1 Debtor 2 Bobby Joe Green Susan R Green Case number (if known)

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly exp the following IRS categories.	enses for	
16. <b>Taxes:</b> The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxe self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  Do not include real estate, sales, or use taxes.	•	605.04
17. <b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement		
contributions, union dues, and uniform costs.  Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll saving	s \$	0.00
18. <b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people	· <u> </u>	
filing together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any of life insurance other than term.		0.00
<ol> <li>Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.</li> </ol>		
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line	35. \$ <u> </u>	515.04
<ol> <li>Education: The total monthly amount that you pay for education that is either required:</li> <li>as a condition for your job, or</li> </ol>		
for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
<ol> <li>Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.</li> </ol>		
Do not include payments for any elementary or secondary school education.	\$	0.00
22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health car that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or p by a health savings account. Include only the amount that is more than the total entered in line 7.		
Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employm expenses, such as those reported on line 5 of Official Form 22C-1, or any amount you previously deducted.		0.00
24. Add all of the expenses allowed under the IRS expense allowances.	\$	4,729.75
Add lines 6 through 23.		
Additional Expense Deductions These are additional deductions allowed by the Means Test.		
Note: Do not include any expense allowances listed in lines 6-24.		
25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for he insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spo your dependents.		
Health insurance \$ 336.73		
Disability insurance \$ 0.00		
Health savings account + \$		
Total \$ Copy total here=>	\$	336.73
Do you actually spend this total amount?  No. How much do you actually spend?		
Yes \$		
26. Continued contributions to the care of household or family members. The actual monthly expenses that you continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.		0.00
27. <b>Protection against family violence.</b> The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that approximately the control of the co		
By law, the court must keep the nature of these expenses confidential.	\$_	0.00

Debtor 1	Bobby Joe Green		
	Susan R Green	Case number (if known)	

ebtor 2	Bobby Joe Green Susan R Green	Case number (if known)				
28.	Additional home energy costs. Your hom allowance on line 8.	ne energy costs are included in your non-mortgage housing and utilities				
		costs that are more than the home energy costs included in the ce, then fill in the excess amount of home energy costs.				
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the additional ary.	\$_	0.00		
29.		dren who are younger than 18. The monthly expenses (not more than expendent children who are younger than 18 years old to attend a private of	or			
	You must give your case trustee document claimed is reasonable and necessary and r	tation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.				
	* Subject to adjustment on 4/01/16, and even	\$_	0.00			
30.	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.					
		tional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.				
	You must show that the additional amount	claimed is reasonable and necessary.	\$_	38.0		
31.	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)3 and (4).					
32.	Add all of the additional expense deduct Add lines 25 through 31.	tions	\$	374.73		
			<u> </u>			
33. <b>F</b>	oans, and other secured debt, fill in lines					
33. <b>F</b>	For debts that are secured by an interest oans, and other secured debt, fill in lines	s 33a through 33g.  nent, add all amounts that are contractually due to each secured		ige monthly		
33. <b>i</b>	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home	s 33a through 33g.  nent, add all amounts that are contractually due to each secured unkruptcy. Then divide by 60.	paym	ent		
33. <b>I</b>	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here	s 33a through 33g.  nent, add all amounts that are contractually due to each secured	paym			
33. <b>I</b> 0	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles	s 33a through 33g.  nent, add all amounts that are contractually due to each secured unkruptcy. Then divide by 60.	paym	0.00		
33. <b>i</b>	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	s 33a through 33g.  nent, add all amounts that are contractually due to each secured unkruptcy. Then divide by 60.	paym	0.00 133.33		
33. <b>I</b> 1	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath of the months after you file for bath of th	s 33a through 33g.  nent, add all amounts that are contractually due to each secured unkruptcy. Then divide by 60.	\$	0.00		
33. <b>I</b> 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 5 .	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath of the months after you file for bath of th	s 33a through 33g.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.	payme	0.00 133.33		
33. <b>I</b> 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 5 .	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	s 33a through 33g.  nent, add all amounts that are contractually due to each secured unkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes	payme	0.00 133.33		
33. I I I I I I I I I I I I I I I I I I	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  e of each creditor for other secured debt	s 33a through 33g.  Inent, add all amounts that are contractually due to each secured sinkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No	\$\$	0.00 133.33		
33. <b>I</b> 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 5 .	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  e of each creditor for other secured debt	s 33a through 33g.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?	payme	0.00 133.33		
33. I I I I I I I I I I I I I I I I I I	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  e of each creditor for other secured debt	s 33a through 33g.  Inent, add all amounts that are contractually due to each secured sinkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No	\$\$	0.00 133.33		
33. I I I I I I I I I I I I I I I I I I	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  e of each creditor for other secured debt  -NONE-	s 33a through 33g.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes or insurance?  No Yes	\$\$	0.00 133.33		
33. I 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  e of each creditor for other secured debt  -NONE-	s 33a through 33g.  Inent, add all amounts that are contractually due to each secured sinkruptcy. Then divide by 60.	\$\$	0.00 133.33		
33. I I I I I I I I I I I I I I I I I I	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  e of each creditor for other secured debt  -NONE-	s 33a through 33g.  Inent, add all amounts that are contractually due to each secured sinkruptcy. Then divide by 60.	\$ \$ \$ \$	0.00 133.33		
33. I I I I I I I I I I I I I I I I I I	For debts that are secured by an interest oans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  e of each creditor for other secured debt  -NONE-	s 33a through 33g.  Inent, add all amounts that are contractually due to each secured sinkruptcy. Then divide by 60.	\$\$	0.00 133.33		

**Bobby Joe Green** 

tor 2 Susa	an R Green			Case	number (if known)		
		ine 33 secured by your pringons and pringon in the support or the					
■ No.	Go to line 35.						
	State any amount that yo listed in line 33, to keep p	ou must pay to a creditor, in a possession of your property I in the information below.					
Name of the	creditor	Identify property that secu	ures the debt	1	Total cure amount	Mon amo	thly cure unt
-NONE-				\$		÷ 60 = \$	
				Total	0.00	Copy total here=>	\$ 0.00
that are	past due as of the filing	such as a priority tax, chil date of your bankruptcy ca	d support, or a ase? 11 U.S.C.	<b>alimony -</b> § 507.			
_	Go to line 36.						
■ Yes.		all of these priority claims. I such as those you listed in lir		current or			
	Total amount of all past	d-due priority claims			60,000.00	<u>)</u> ÷60 \$	1,000.00
6. Projecte	ed monthly Chapter 13 pla	an payment		9	i		
Office of the Exec To find a li	the United States Courts ( cutive Office for United State list of district multipliers that inc	s stated on the list issued by (for districts in Alabama and tes Trustees (for all other dis cludes your district, go online usir ist may also be available at the b	North Carolina) stricts). ng the link specifie	or by d in the		70	
Average	monthly administrative exp	pense			\$	Copy total here=> \$	
7 / 1   1   1   1   1	of the deductions for the	ebt payment.				\$	1,233.33
/ ACC ALL	or the deductions for de	at paymont.					-
	l <b>of the deductions for de</b> es 33g through 36.						
Add line							
Add line	es 33g through 36.	S.					
Add line otal Deduc  8. Add all c Copy lin	es 33g through 36.		\$	4,729.75			
Add line otal Deduc  8. Add all c Copy line expense	es 33g through 36.  ctions from Income  of the allowed deductions ne 24, All of the expenses	allowed under IRS	\$ *	4,729.75 374.73			
Add line  otal Deduc  8. Add all c  Copy lir  expense  Copy lir	es 33g through 36.  ctions from Income  of the allowed deductions are 24, All of the expenses are allowances	allowed under IRS expense deductions	·	-			

**Bobby Joe Green** 

ebtor 1 ebtor 2	Bobby Joe Green Susan R Green Case					if known)		
art 2:	Determine Y	our Disposable Income Und	er 11 U.S.C. § 1325(b)(	2)				
		urrent monthly income from		mitmont Boried			\$	3,789.94
<b>ch</b> i dis rec	ildren. The more ability payments beived in accordate.	ably necessary income you nathly average of any child supper for a dependent child, reported ance with applicable nonbankropended for such child.	ort payments, foster car ed in Part I of Form 22C	dependent re payments, or -1, that you	\$		0.00	
em in 1	ployer withheld 11 U.S.C. § 541	d retirement deductions. The from wages as contributions for (b)(7) plus all required repaymence. § 362(b)(19).	or qualified retirement pl	ans, as specified	\$	(	0.00	
42. <b>To</b> t	tal of all deduc	tions allowed under 11 U.S.C	C. § 707(b)(2)(A). Copy I	ine 38 here=>	\$	6,33	7.81	
exp the	penses and you eir expenses. Yo	ecial circumstances. If special have no reasonable alternative unust give your case trustee and documentation for the expensions.	e, describe the special of a detailed explanation o	circumstances and	i			
Descri	ibe the special	circumstances		Amount of exper	nse			
43a.			\$					
43b.			\$					
43c.	ī		\$					
43d.	Total. Add line	s 43a through 43c.	\$	0.00	Copy 4 here=>		0.00	
44. <b>To</b>	tal adjustments	s. Add lines 40 through 43d.		=> \$		6,337.81	Copy total here=> -\$	6,337.81
45. <b>Ca</b>	lculate your mo	onthly disposable income ur	nder § 1325(b)(2). Subtr	act line 44 from lii	ne 39.		\$	-2,547.87
rt 3:	Change in Ir	ncome or Expenses						
rep file info pet the	ported in this form of your bankrupt ormation below. tition, check 220	e or expenses. If the income im have changed or are virtuall cy petition and during the time For example, if the wages repc-1 in the first column, enter lined, fill in when the increase occurred.	y certain to change after your case will be open, orted increased after yo se 2 in the second colum	r the date you fill in the u filed your nn, explain why				
Form	Line	Reason for change		Date of change		rease or crease?	Amount of cha	nge
☐ 22C ☐ 22C ☐ 22C	-2 -1					Increase Decrease Increase Decrease Increase	\$	

Debtor 1 Debtor 2	Bobby Joe Green Susan R Green		Case number (if known)				
Part 4:	Sign Below						
	By signing here, under penalty of perjury you declare that the info						
	/s/ Bobby Joe Green Bobby Joe Green Signature of Debtor 1	Х	/s/ Susan R Green Susan R Green Signature of Debtor 2				
Date	September 24, 2015 MM / DD / YYYY	Date	September 24, 2015 MM / DD / YYYYY				